



PARK-CENTER

Indoor Summer Swim Lessons

Tuesday & Thursday Evenings

Session # Dates (Registration Dates)

- 1 June 7-30 (May 20, 5am - Deadline June 4)
- 2 July 5-28 (June 24, 5am - Deadline July 2)

4:00-4:30	4:35-5:05	5:10-5:40	5:45-6:15	6:20-6:50
All Levels	All Levels	All Levels	All Levels	All Levels, Guppies
		Guppies	Adult Beginning 5:45-6:20	Adult Intermediate 6:25-7:00

Saturday Mornings

Session # Dates (Registration Dates)

- A June 18-Aug 6**
(Registration: May 16, 5am - Deadline June 15)

9:00-9:30	9:35-10:05	10:10-10:40	10:45-11:15	11:20-11:50
All Levels	All Levels	All Levels	All Levels	All Levels
Adult Beginning	Guppies	Adult Beginning	Guppies	Adult Intermediate

Ages: Guppies* (6 months-4 Years)

**Parent and Child are both in the water*

All Levels (3-16 Years)

Adult (16+ Years)

Cost: \$35/\$40 (Resident/Non-Resident)

Each Session includes 8 lessons, 30 min each.

Monday-Thursday Mornings

Session # Dates (Registration Dates)

- 1 June 6-16 (May 2, 5am - Deadline June 2)
- 2 June 20-30 (June 10, 5am - Deadline June 16)
- 3 July 5-14* (June 24, 5am - Deadline June 30)
- 4 July 18-28 (July 8, 5am - Deadline July 14)
- 5 Aug 1-11 (July 22, 5am - Deadline July 28)

11:10-11:40 AM	11:45 AM-12:15 PM
All Levels	All Levels
Guppies	Adult Beginning

* Due to the 4th of July Holiday Classes will run Tuesday-Friday the 1st week. The 2nd week classes will resume Monday-Thursday.

Participant's Name _____

Age _____ Male or Female Birthdate _____ Grade _____ School _____

Address _____ City _____ Zip _____

Parent/Guardian Name _____ Phone _____ E-mail _____

Emergency Contact _____ Relation _____ Phone Number _____

Has participant taken Swim Lessons before? No ____ Yes ____ Last Level Completed _____

Level: _____ Session: _____ Time: _____ Preferred Instructor: _____

Does the participant have any limitations? No/Yes If yes, please explain: _____

LIABILITY RELEASE AND PERMISSION TO PARTICIPATE

In consideration of the acceptance of my application for the above activity, I hereby waive, release, and discharge any and all claims for damages, for death, personal injury, or property damage which I, as the participant, (or my child) may have, or which may hereafter accrue as a result of participation in said event. It is understood that some recreational activities involve an element of risk or danger of accidents, and knowing those risks, I hereby assume those risks. It is further understood and agreed that this waiver, release and assumption of risk is to be binding on my heirs and assigns. I have read and understood the foregoing registration, and agree to all of their terms and conditions. **NO make-up lessons for missed classes. Registrations will NOT be accepted after the deadline. Refunds will NOT be given after 1st day of class. If my child has any special needs or limitations I will let the Park Center know before the first day of class.**

Signature of Parent/Guardian _____

_____/_____/2016

Date 202 E Murray Park Ave
Murray, Utah 84107
(801) 284-4200



Office Use Only

Paid \$ _____
CASH CHECK VISA
DISC AMEX MC
Date: _____ Staff: _____